

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | DATE     |
|---------------------------|----------|----------|
| FEE DETERMINATION         | 7        | 0-12-01  |
| O.I.P.E. CLASSIFIER       | MDV 50   | 05-10-01 |
| FORMALITY REVIEW          | MD 579   | 6/20/01  |
| RESPONSE FORMALITY REVIEW | Zm 927   | 09/26/01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     | 1     | 1        |      |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
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 0426/01

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